

House Committee on Human Services

The Hon. Dee Morikawa, Chair The Hon. Bertrand Kobayashi, Vice Chair

House Committee on Health

The Hon. Della Au Belatti, Chair The Hon. Richard P. Creagan, Vice Chair

Testimony on HCR 203/HR139 Relating to the Health Care Submitted by Nani Medeiros, Public Affairs and Policy Director March 19, 2015, 11:30 am, Room 329

The Hawai'i Primary Care Association, which represents community health centers in Hawai'i, strongly supports HCR 203/HR 139, requesting the auditor to conduct a review on the effect of the transfer from Medicaid to plans on the Hawaii Health Connector for non-eligible Medicaid Compact of Free Association resident.

Under the Compacts of Free Association (COFA), individuals from the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau are granted legal migrant status in Hawaii. However, due to recent changes they are no longer eligible to receive Medicaid benefits and must instead enroll in the state health insurance exchange. Under the exchange, they are viewed as living at 100% of the federal poverty level (FPL), regardless of actual income, and made to cover any existing lapses in insurance premium, copayment amounts, or deductibles. In Hawaii there are approximately 7,500 COFA migrants, many of whom live well below 100% FPL and will be unable to cover these additional costs.

This bill is of special import to the HPCA because a large majority of COFA migrants receive primary care from community health centers. Many of these patients tend to have co-occurring chronic and communicable diseases as well as linguistic and cultural barriers to care. Any additional burdens imposed upon this population, such as further financial expense, will only serve to jeopardize their ability to access care when needed.

The HPCA appreciates the parameters outlined in the proposed study, especially those considering the mortality and morbidity rates of the COFA population and the amount of uncompensated care provided at community health centers.

For these reasons, we strongly support HCR 203/HR139 and thank you for the opportunity to testify.